

8-5-04

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01095 7590 05/11/2004

NOVARTIS
CORPORATE INTELLECTUAL PROPERTY
ONE HEALTH PLAZA 430/2
EAST HANOVER, NJ 07936-1080

08/06/2004 JBALINA2 00000126 190134 09966960

01 FC:1501 1330.00 DA
 02 FC:1504 300.00 DA
 03 FC:1504 APPLICATION NO. 09.966.960 FILING DATE

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

CONFIRMATION NO.

09/966,960

09/28/2001

Paivi Jaana Kukkola

30879E/N1CGC

5476

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

see filing by Express Mail

(Depositor's name)

below

(Signature)

(Date)

TITLE OF INVENTION: THYROMIMETIC ORGANIC COMPOUNDS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/11/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRUONG, TAMTHOM NGO	1624	560-019000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Norbert Gruenfeld2 Paivi Kukkola

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Novartis AG

Basel, Switzerland

(Assignment mailed to PTO

on January 22, 2004)

Please check the appropriate assignee category or categories (will not be printed on the patent); individual corporation or other private group entity government

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 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies 10 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0134 (enclose an extra copy of this form).

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(Authorized Signature) Paivi Kukkola (Date) Aug. 4, 2004

Paivi Kukkola Reg. No. 50,499

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